PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2003								Application or Docket Number RD / / / / / / / / / / / / / / / / / / /					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL TYPE	ENTITY	OR	•	THAN ENTITY	
TOTAL CLAIMS			3/					RATE FEE		7	RATE	FEE	
FOR			NUMBER FILED		NUM	MBER EXTRA		BASIC FI	SE 385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			/ minus 20= *		•//					OR	X\$18=	101	
INDEPENDENT CLAIMS			minus 3 = *					X43=	1	OR	X86=	. 70	
М	ULTIPLE DEPE	NDENT CLAIM P	RESENT				Ì	+145=		OR	+290=		
* If the difference in column 1 is less than zero, enter "0" in column 2						L	TOTAL		-∤ ∣		010		
CLAIMS AS AMENDED - PART II								IOIAL	·	OR	TOTAL	10 D	
	(Column 1) (Column 2) (Column 3)							SMALL	ENTITY	OR	OTHER SMALL:		
ENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NO N	Total	. 31	Minus	- 31		- /	ſ	X\$ 9=		OR	X\$18=	/	
AMENDMENT	Independent	. 3	Minus	 3		=	X43=			OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						f	+145=		OR	+290=		
							L	TOTAL			TOTAL	/	
	(Column 1) (Column 2) (Column 3)							DDIT. FEE	:L	Jon ,	ADDIT. FEE		
ENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOUS PAID F	ST ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NON	Total	•	Minus	**	•	=	Γ	X\$ 9=		OR	X\$18≃	·	
AMENDMENT	Independent	*	Minus .	***		=	r	X43=		OR	X86=		
لا	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=		
							AE	TOTAL DIT. FEE		OR ,	TOTAL ODIT, FEE	·	
	(Column 1) (Column 2) (Column 3)								٠.				
AMENDMENT C	•	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOL PAID FI	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
ğ	Total	•	Minus	44 ·		= .		X\$ 9=		OR	X\$18=		
AME	Independent		Minus	444		5	H	X43=	. `		X86=		
	FIRST PRESE	NTATION OF MU	LTIPLE DEF	PENDENT	CLAIM		-			OR			
• н	the entry in colum	Ľ	+145=		OR	+290=							
	"If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." "TOTAL ADDIT. FEE ADDIT. FEE ADDIT. FEE The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

FORM PTO-875 (Rev. 10/03)

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